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PTO/SB/21 (04-07)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/822,577-Conf. #2632
	Filing Date	April 12, 2004
	First Named Inventor	Hideaki Shinmei
	Art Unit	2617
	Examiner Name	A. A. Balaoing
Total Number of Pages in This Submission	Attorney Docket Number	61148(70904)

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Amendment Transmittal
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	EDWARDS ANGELL PALMER & DODGE LLP		
Signature			
Printed name	George N. Chaclos		
Date	October 2, 2007	Reg. No.	46,608

**AMENDMENT TRANSMITTAL LETTER**Docket No.  
61148(70904)Application No.  
10/822,577-Conf. #2632Filing Date  
April 12, 2004Examiner  
A. A. BalaoingArt Unit  
2617

Applicant(s): Hideaki Shinmei

Invention: WIRELESS COMMUNICATIONS APPARATUS AND WIRELESS COMMUNICATIONS  
SYSTEM**TO THE COMMISSIONER FOR PATENTS**

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	19	- 20 =	0	x 50.00	0.00
Independent Claims	2	- 4 =	0	x 210.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00

- ☒ Large Entity ☐ Small Entity
- ☒ No additional fee is required for this amendment.
- ☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of \$ \_\_\_\_\_ to cover the filing fee is enclosed.
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- ☒ The Director is hereby authorized to charge and credit Deposit Account No. 04-1105  
as described below. A duplicate copy of this sheet is enclosed.
- ☒ Credit any overpayment.
- ☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

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Dated: October 2, 2007

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